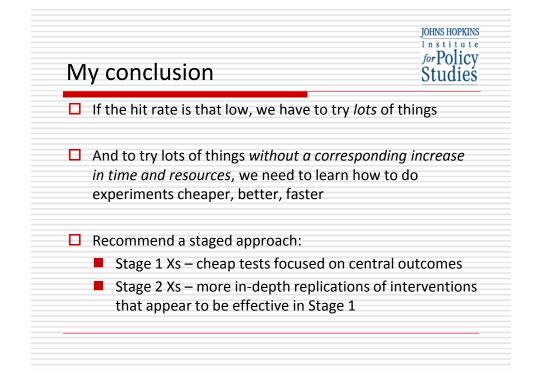
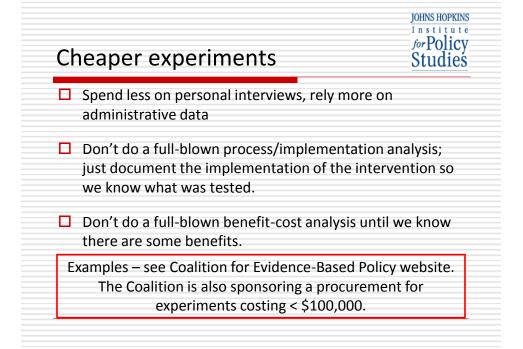


## Where to from here?

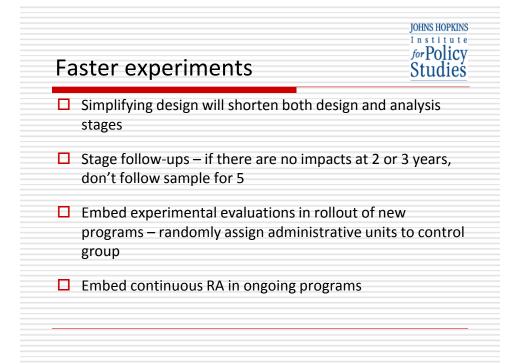
Larry L. Orr Institute for Health and Social Policy Bloomberg School of Public Health Johns Hopkins University

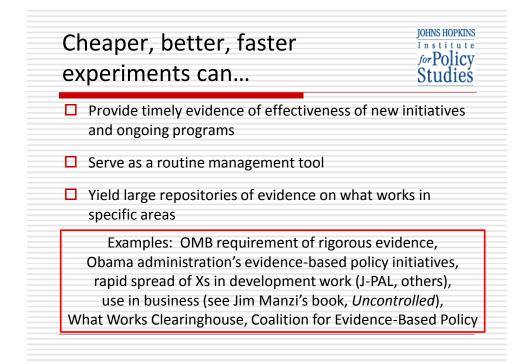
pportion of interventions that, in RCTs, d weak or no positive effects Studie	
<b>Education:</b> 90% weak or no positive effects (of 90 interventions)	
<b>Employment/training:</b> 75% weak or no positive effects (or 13 interventions )	
<b>Business:</b> 80-90% weak or no positive effects (of 13,000 new products/strategies)	
<b>Medicine:</b> Reviews have found that 50-80% of positive results in initial ("phase II") clinical studies are overturned in subsequent, more definitive RCTs ("phase III").	





Be	etter experiments	JOHNS HOPKIN Institute for Policy Studies	
	Pay more attention to matching the sample with population of policy interest	the	
	Resist the temptation to search for significant ef somewhere. Adopt the confirmatory/explorator framework and adjust tests of significant for mu estimates. If confirmatory tests aren't significan	'y Itiple	
	Pay more attention to replication, in light of low hit rate.		
	Examples: National Head Start Study; IES Guidelines on multiple comparisons, DOL replications of youth training programs, Coa for Evidence-Based Policy Top Tier standard		





For additional information,	JOHNS HOPKINS Institute for <b>Policy</b>
copies of these slides, etc	for Policy Studies

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